MDR: M4-04-0344-01

Under the provisions of Section 413.031 of the Texas Workers' Compensation Act, Title 5, Subtitle A of the Texas Labor Code, effective June 17, 2001 and Commission Rule 133.305, titled Medical Dispute Resolution-General, and 133.307, titled Medical Dispute Resolution of a Medical Fee Dispute, a review was conducted by the Division regarding a medical fee dispute between the requestor and the respondent named above. This dispute was received on September 19, 2003.

## I. DISPUTE

Whether there should be reimbursement for out-of-pocket expenses for prescription medications for dates of service September 26, 2002 through July 8, 2003.

## II. RATIONALE

EOB's were not submitted by either party; therefore, this dispute will be reviewed per the Pharmaceutical Guidelines.

The requestor submitted receipts for dates of service May 9, 2003 and August 5, 2003 showing payment for hydroco/APAP10-325MG Tab. However, according to Texas Workers' Compensation Commission Rule 133.307 (f)(3), the requestor has not submitted any convincing evidence of the carrier receiving the employee's request for reimbursement; therefore, reimbursement is not recommended.

## IV. DECISION

Based upon the review of the disputed healthcare services within this request, the Division has determined that the requestor is not entitled to reimbursement for out-of-pocket expenses for prescription medications.

The above Findings and Decision are hereby issued this 19th day of March 2004.

Marguerite Foster Medical Dispute Resolution Officer Medical Review Division

MF/mf